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CONFIRMATION NO. 7324

SERIAL NUMBER 10/682,184	FILING OR 371(c) DATE 10/09/2003 RULE	CLASS 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO. 106586-170
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APPLICANTS

Lee A. Core, Cambridge, MA;

** CONTINUING DATA *****

This appln claims benefit of 60/417,705 10/10/2002

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

01/09/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 4	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Ch</i> Examiner's Signature	Initials			

ADDRESS

23483

TITLE

Hemostasis valve

FILING FEE RECEIVED 856	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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